



**CABINET FOR HEALTH AND FAMILY SERVICES  
Department for Medicaid Services  
Commissioner's Office**

**Ernie Fletcher**  
Governor

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**James W. Holsinger, Jr., M.D.**  
Secretary

June 15, 2005

**Adult Day Health Care Provider Letter # A-24**

**Dear Adult Day Health Care Provider:**

**Subject: Upcoming Changes**

The Department for Medicaid Services (DMS) has been approved by the Centers for Medicare and Medicaid Services (CMS) to implement the following changes to the Home and Community Based Waiver (HCBW) for Aged and/or Disabled Individuals. The following changes will be effective July 1, 2005:

- Adult Day Health Care Centers (ADHC) will be allowed to perform Assessments and Reassessments and provide Case Management for HCBW. The claims payment system has been changed to allow ADHC provider type 43 to submit claims for these services.
- DMS will expand the types of licensed professionals that HCBW and ADHC providers may utilize to provide Assessment, Reassessment and Case Management. These additional licensed professionals are:
  - ☐ Licensed Marriage and Family Therapist;
  - ☐ Licensed Professional Clinical Counselor (LPCC); and
  - ☐ Certified Psychologist with Autonomous Functioning or Licensed Psychologist Practitioner
- The completion of the MAP-109 will now be included in the care planning process under Case Management. Completion of the MAP-109 will no longer be part the Assessment/Reassessment process. DMS will add a unit to case management to include completion of the MAP-109.
- The MAP-351A has been revised. A section has been added to allow the recipient to choose consumer directed option. This section will not be completed until consumer directed option has been implemented. There have been some changes to the signature section at the end of the form. ADHC will no longer sign off on forms completed by the HCBW provider. A section has also been added to provide for signatures in the case where a 351A completed by an agency and forwarded to another agency for care planning. The form has been revised to provide a place for the sending and receiving agencies to log the time and date sent or received. For

example, if the recipient requests that an HCBW provider conduct the Assessment/Reassessment but then chooses the ADHC to provide Case Management, the HCBW provider will conduct the Assessment/Reassessment and call for verbal level of care. Then, the HCBW provider will have twenty-four (24) hours to forward the MAP-351A to the chosen ADHC provider. The time and date the HCBW provider forwarded the form and the time and date the ADHC provider received the form should be indicated on the MAP-351A. An in-house log must be maintained by each agency recording the submittal/receipt of the MAP-351A to/from another agency. This log should include the date of verbal level of care, date mailed and signature and date received and signature.

- The MAP-109 has been revised to accommodate the implementation of consumer directed option at a later date. HCBW and ADHC providers will complete the first part of the form which has remained the same. You will not be required to complete the CDO sections of the form (this section will be completed by the Support Broker once consumer directed option has been implemented). The entire form, including the portions that were not completed should be submitted to the QIO. Effective July 1, 2005, HCBW and ADHC providers should begin using the revised MAP-109. DMS is extending the packet submittal timeframe from fourteen (14) days to twenty-one (21) days to include the care planning process.

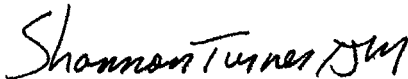
The revised MAP-351A and the revised MAP-109 along with instructions can be found at <http://chfs.ky.gov/dms/hcb.htm>.

HCBW recipients have freedom to choose the agency that will provide their waiver services (including Assessment/Reassessment and Case Management). Recipients can choose whether Assessments/Reassessments and Case Management are provided by an HCBW provider or an ADHC provider.

DMS will be conducting a teleconference workshop on June 21, 2005. The morning session (10:00 a.m. to 12:00 p.m.) will address changes to the waiver effective July 1, 2005. The afternoon session (1:00 p.m. to 4:00 p.m.) will be a training session on the Assessment/Reassessment process and Case Management. Training will be done on the MAP-351A and the MAP-109. The teleconference sites are attached. Seating may be limited at some of the sites, so please contact Kristina Hayden or Craig Cooper at (502) 564-5560 by June 17, 2005 confirm your attendance and reserve your seat at your selected site.

If you have any questions about these changes and are unable to participate in the teleconference, please contact Kristina Hayden, Craig Cooper or Jennifer Smith at (502)564-5560.

Sincerely,



Shannon R. Turner, JD  
Commissioner

C: Angela G. Kirkland, MA, Director  
Mary Walker, Assistant Director  
Kristina Hayden  
Jennifer Smith, RN  
Craig Cooper  
Marilyn Ferguson, RN

## Teleconferencing Sites for HCBW/ADHC Training

June 21, 2005

10:00 a.m. – 4:00 p.m.

Pathways Ashland  
1212 Bath Ave.  
Ashland, KY 41105

Comprehend Maysville  
611 Forest Ave.  
Maysville KY 41056

Barren River District Health Dept.  
1109 State St.  
Bowling Green KY 42101

UK Hospital Auditorium  
800 Rose St., 6<sup>th</sup> floor auditorium  
Lexington, KY 40503

UK Center for Rural Health  
750 Morton Blvd.  
Hazard, KY 41701 Rm. 218

Western Baptist Hospital- Paducah  
2501 Kentucky Ave., Meeting Room F  
Paducah, KY 42002

Adanta Somerset  
101 Hardin Lane  
Somerset KY 42503